



Washington State 2004 Health Professional Loan Repayment Program

310 Israel Road SE ♦ PO Box 47834 ♦ Olympia, Washington 98504-7834

Dear Health Professional:

Thank you for your interest in the Washington State Health Professional Loan Repayment Program. An application is included in this packet for your use. The Health Professional Loan Repayment Program is a state-supported general fund program where awards are made on a competitive basis and limited to the availability of funds. The aggregate debt of all applicants has normally exceeded the funds available in any given year. **Not all eligible applicants are assured of participation in the program.** Program funds are designated as a priority for sites and/or practices demonstrating service to underserved populations. **It is expected that the site AND provider client population reflects the demographics of the service area described on the site application.**

Applications must include the required attachments. **Incomplete applications will not be processed.** Program emphasis continues to be on recruitment candidates; therefore, applications will be reviewed on the following schedule:

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| <ul style="list-style-type: none">• Recruitment: (Hired after September 2002 or filling a current vacancy.) Due February 27, 2004 or July 30, 2004• Retention: (Hired prior to September 2002.) Due July 30, 2004. |
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<p><i>NOTE: Only recruitment applications will be considered in the first cycle of awards. In the second cycle, however, both recruitment and retention applications will be given equal consideration based upon their site priority. Funding is split between the two cycles. However, available funding has never been adequate to fund all those who submit qualified applications.</i></p>
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Applicants are required to make a tentative match with an eligible site **PRIOR** to submitting an application. A list of eligible sites is provided in the back of this application packet. **It is the responsibility of the health professional and site to contact each other to establish an appropriate match.** After an award has been made, it will be necessary for the health professional to submit contract documentation verifying the match has been confirmed. **A site may not receive two awards in the same profession in the same year.** In the event one site has two or more applicants from the same profession, the site will be given the opportunity to identify how the award will be distributed. This award **will not** exceed the highest debt requested or \$75,000, whichever is less.

Loan repayment funds are taxable income. Each recipient is responsible for the tax liability. The Washington State program does not include an additional payment to cover the tax liability. Program recipients will receive an IRS Form 1099 for tax reporting purposes. All funds obtained from this program must be applied to the educational debt submitted with this application. Verification of payments may be requested.

If you have any questions regarding the application process, contact:

Kathy McVay

Program Manager

(360) 236-2816

Kathy.McVay@doh.wa.gov

December 2003

2004 Health Professional Loan Repayment Program

ELIGIBILITY: *To be eligible to apply, an individual must:*

1. Be enrolled as a full-time student in the final year of an approved course of study or program which leads to a degree in an eligible health profession and which is offered by an accredited school; be enrolled in an accredited graduate training program; have a degree in an eligible program and have completed an approved graduate training program; have a current and valid license to practice such health profession in Washington State by the time of execution of contract; or be in the final stage of training to be licensed to practice an eligible health profession; submit an application on the official application form for participation in the Health Professional Loan Repayment Program;
2. Agree to serve an equivalent to full-time for not less than three years;
3. Agree to charge for professional services at the usual and customary rate prevailing in the area in which such services are provided;
4. Agree not to discriminate against any person on the basis of his/her ability to pay for services or because payment for the health services provided to the individual will be made under part A or B of Title XVIII of the Federal Social Security Act or under a state plan for medical assistance approved under Title XIX of such Act;
5. Agree to accept an assignment under the terms specified in Title XVIII of the federal Social Security Act, section 18.42 (b)(3)(B)(ii);
6. Agree to enter an agreement with the state Medicaid agency to provide services to individuals entitled to medical assistance under the plan;
7. Agree to repay to the program an amount equal to **twice the total amount paid by the program** if the service obligation is not met; and
8. **Not owe an obligation for health professional service to the military, federal government, state, or other entity unless that obligation will be completely satisfied prior to the beginning of service under this program.**

SELECTION: *Applicants will be selected for participation in the Health Professional Loan Repayment Program based upon the following criteria:*

1. The individual's training in a health profession or specialty needed to fulfill an underserved area in Washington State;
2. The individual's commitment to serve in a medically underserved area or community-based primary care site as determined by the statement of commitment on the application form;
3. The availability of the individual for service, with highest consideration being given to individuals who will be available for service at the earliest dates;
4. The length of the individual's proposed service obligation, with greatest consideration being given to persons who agree to serve for longer periods of time; and
5. The individual's academic standing, prior professional experience in a medically underserved area or health personnel shortage area, board certification, residency achievements, peer recommendations, depth of past residency/practice experience, and other criteria related to professional competence or conduct.

Among individuals determined to be eligible for the program, priority will be given to those qualified applicants whose health profession or specialty is most needed, and who are most committed to medically underserved areas and health personnel shortage areas.

AWARD: *Participants shall receive payment from the program for the purpose of repaying educational loans secured while attending a program of health professional training which led to licensure as a health professional.*

1. Repayment shall be limited to loans covering reasonable educational and living expenses and shall include principal and interest.
2. Financial debts or service obligations which do not qualify for repayment include: Public Health Service and National Health Service Corps scholarship training program, National Health Service Corps scholarship program, Armed Forces (Army, Navy, or Air Force) health professional scholarship programs. Loans not obtained from a government entity or commercial lending institution, such as loans from friends and relatives will be reviewed on an individual basis. Loans obtained for educational or personal expenses while at school which exceed the "reasonable" level of cost of attendance are not eligible.
3. **Payments shall be made quarterly to the participant** until the loan is repaid or the participant becomes ineligible due to discontinued service in a health personnel shortage area or after the fifth year of service when eligibility discontinues, whichever comes first. **All funds obtained from this program must be applied to the educational debt submitted with this application. Verification of payments may be requested.**
4. Participants will be required to submit appropriate documentation of service each quarter as required by the program verifying the terms of the agreement have been met for each payment period. **The first payment can be expected after completion of the first quarter of service has been confirmed by submittal of a Service Confirmation form.**
5. Participants violating the non-discrimination provisions described in Section I, (5,6,7) shall be declared ineligible for receiving assistance.
6. Participants shall agree to execute a release to allow the program access to loan records and to acquire information from lenders necessary to verify eligibility and to determine payments. **Loans may not be renegotiated with lenders to accelerate repayment.**

REPAYMENT:

1. Participants who serve less than three years shall be required to repay to the program an amount equal to **twice the total amount** paid by the program.
2. At the request of the participant, the program may waive, in full or in part, the obligation for service or its rights to recover financial damages whenever the program determines that failure to do so was due to circumstances beyond the participant's control. Conditions that would be considered as a waiver from default provisions may include: participant becomes physically impaired to the degree that he/she can no longer function in his/her assigned duties; or participant becomes mentally impaired to the degree that he/she can no longer function in his/her assigned duties; or death.
3. The program shall not be held responsible for any outstanding payments on principal and interest to any lenders once a participant's eligibility expires.



Washington State
**2004 Health Professional Loan
Repayment Program**

Loan Repayment Application
"Benefit from being needed"

Personal

Applicant must be licensed or eligible for licensure in Washington State.

Name: _____ / _____ / _____ SS #: _____ / _____ / _____
Last Name First Name Middle Initial

Address: _____ Date of Birth: _____ / _____ / _____

City: _____ State: _____ Zip: _____

Telephone (day): (____) _____ Telephone (eve): (____) _____ E-Mail: _____

Career needs of spouse (if applicable): _____

Your Hometown: _____ Spouse's Hometown: _____

Your Ethnic Origin: _____ Male _____ Female _____

Upon completion of training, do you have another service obligation? **Please note: program recipients cannot commit simultaneously to two service obligations.** No: _____ Yes: _____ (If so, please specify below.)

NHSC: _____ IHS: _____ Military: _____ Other (Specify): _____

Education

Undergraduate School: _____ GPA: _____

Degree: _____ Date Received: _____ Years/credits completed: _____

Graduate/Professional School: _____

Degree: _____ Date Received: _____ Years/credits completed: _____

Residency/Internship/Preceptorship: _____

Current and Professional Status

Residency: _____ Military: _____

Practice: _____ Other (describe): _____

Are you Board eligible? _____ Board certified? _____ Specialty: _____

Community Information

Facility: _____

Address: _____

County: _____ City: _____ State: _____ Zip: _____

Telephone: (_____) _____ FAX: (_____) _____ E-Mail: _____

Name of key contact: _____ Beginning date of employment: _____

Full Time: _____ Part Time: _____ Days/Hours Per Week: _____

Licensure Information

Are you a licensed health care provider in Washington State? Yes: _____ No: _____

If "Yes," provide the license number: _____

If "No," to the best of your knowledge, are you eligible to be licensed in Washington State? Yes: _____ No: _____

Are you a licensed health care provider in any state other than Washington? Yes: _____ No: _____

If "Yes," what type: _____ State: _____

Professional Experience

(Make brief, concise statements)

Summarize your work/training/practice experience. Comment specifically on your experiences in rural/underserved urban areas.

Describe your long-range personal and professional goals.

Discuss your commitment to serve in this community/site.

Describe any life experiences you feel make you an appropriate match for this community/site. Include such things as multicultural experiences, languages in which you are fluent, hobbies, interests, etc.

Agreement

I certify that the statements made herein are correct to the best of my knowledge. I authorize the Health Professional Loan Repayment Program to maintain a record of this information. I understand that any referral by the Health Professional Loan Repayment Program is not to be interpreted as an endorsement by the program. I further understand that it is my responsibility to evaluate the credentials and references of the site/opportunities/providers.

I agree, if accepted into this program, to serve for a minimum of three years and to accept Medicare assignments and Medicaid patients. I further agree that all funds obtained from this program will be applied to the educational debt submitted with this application.

Signature of Applicant: _____ Date: _____

Special Note

Loan repayment funds are taxable income. Each recipient is responsible for the tax liability. The Washington State Program **DOES NOT** include an additional 39 percent to cover the tax liability.

Attachment Checklist

- _____ **Current** loan statement(s) with amount outstanding (*required*)
- _____ Recommendation letters (three) from training supervisors/professional colleagues (*required*)
- _____ Facility Administrator Confirmation form (*required*)
- _____ Letter confirming residency certification (if applicable)
- _____ Verification of Board eligibility (if applicable)
- _____ Professional school transcript (*required*)
- _____ Copy of employer/employee contract and/or agreement (*required*)

Mail Completed Application To:

Health Professional Loan Repayment Program
Office of Community and Rural Health
310 Israel Road SW
PO Box 47834
Olympia, WA 98504-7834

Telephone: 360-236-2816
FAX: 360-664-9273
E-Mail: Kathy.McVay@doh.wa.gov

Deadlines for 2004 Applications

Recruitment Applications: February 27, 2004 and July 30, 2004

Recruitment and Retention Applications July 30, 2004

NOTE: *Recruitment applications will be considered in the first cycle of awards. In the second cycle, however, both recruitment and retention applications will be given equal consideration based upon their site priority. Funding is split between the two cycles. Please note - available funding has never been adequate to fund all those who submit qualified applications.*

PRIMARY CARE PHYSICIANS (MD or DO)

Airway Heights Correction Center ~ Airway Heights
Columbia Valley Community Health ~ Chelan
Lourdes Medical Center ~ Pasco
Mt. View Women's Health Center ~ Shelton
North Basin Medical Clinics ~ Davenport, Wilbur
Olympic Primary Care ~ Port Townsend
Peninsula Community Health Services ~ Aberdeen, Copalis Beach
Roger Saux Health Center ~ Taholah
Sea Mar Community Health Center ~ Tacoma
Mt. View Women's Health Center (YVFWC) ~ Grandview

PHYSICIAN ASSISTANTS/NURSE PRACTITIONERS

Airway Heights Correction Center – Airway Heights (PA/NP)
Community Health Care ~ Tacoma, (PA/NP) Tillicum, (PA) Soundview (PA/NP)
Garfield County Memorial Hospital ~ Pomeroy (PA/NP)
Jamestown Family Health Clinic ~ Sequim (PA/NP)
Jefferson General Medical Group ~ Port Townsend
Lincoln-RAP Work Release ~ Tacoma (NP)
McNeil Island Corrections Center ~ Steilacoom (PA)
Moses Lake Community Health Center ~ Quincy (PA/NP)
Native Health of Spokane ~ Spokane (NP)
NE Washington Health Programs ~ Northport (PA)
Olympic Primary Care ~ Pt. Townsend (PA/NP)
Peninsula Community Health ~ Aberdeen, Copalis Beach, Pt Orchard, Poulsbo (PA)
Pomeroy Medical Clinic ~ Pomeroy (PA/NP)
Quincy Valley Medical Center ~ Quincy (PA)
Roger Saux Health Center ~ Taholah (NP)
SeaMar Community Health Center ~ Seattle (NP)
Stafford Creek Corrections Center ~ Aberdeen (PA)
Tacoma Pre-Release ~ Steilacoom (NP)

NURSES

Airway Heights Correction Center ~ Airway Heights (LPN) (RN)
Columbia Valley Community Health ~ Wenatchee (RN)
Community Hlth Association of Spokane ~ Denny Murphy/NE/Valley (RN)
Community Health Care ~ Soundview (RN) Tillicum (RN)
Community Health Center of Snohomish County ~ Everett (RN)
Eastern State Hospital ~ Spokane (LPN) (RN)
Fircrest School for Developmental Disabilities ~ Shoreline (LPN)
Forks Community Hospital ~ Forks (RN)
Garfield County Memorial Hospital ~ Pomeroy (LPN) (RN)
Lincoln Hospital Nursing Home ~ Davenport (LPN) (RN)
Lourdes Medical Center ~ Pasco (RN)
Martha and Mary Health Services ~ Poulsbo (LPN) (RN)
McNeil Island Corrections Center ~ Steilacoom (RN)
Monroe Correctional Complex ~ Monroe (RN)
North Valley Nursing Home ~ Tonasket (LPN)
Odessa Memorial Healthcare Center ~ Odessa (RN)
Okanogan Douglas District Hospital ~ Brewster (RN)
Pacific Care Center (RN)
Pike Market Medical Clinic ~ Seattle (RN)
Puget Sound Neighborhood Health Centers ~ Greenwood (RN)
Puyallup Tribal Health Authority ~ Tacoma (RN)
Roger Saux Health Center ~ Taholah (LPN)
SeaMar Community Health Center ~ Mt. Vernon (RN) Seattle/Tacoma (LPN) (RN)
Stafford Creek Corrections Center ~ Aberdeen (LPN) (RN)
Washington Corrections Center for Women ~ Purdy (RN)
Washington Odd Fellows Home ~ Walla Walla (LPN) (RN)
Western State Hospital ~ Steilacoom (RN)

PHARMACISTS

Clallam Bay Corrections Center ~ Clallam Bay
Columbia Valley Community Health ~ Wenatchee
Community Health Care ~ Tacoma
McNeil Island Corrections Center ~ Steilacoom
Monroe Correctional Complex ~ Monroe
Moses Lake Community Health Center ~ Quincy
Roger Saux Health Center ~ Taholah
SeaMar Community Health Center ~ Olympia
Squaxin Island Health Clinic ~ Shelton
Yakima Neighborhood Health Services ~ Yakima
Yakima Valley Farm Workers' Clinic ~ Toppenish, Yakima

DENTAL HYGIENISTS

Community Dental ~ Sunnyside
Community Health Association of Spokane ~ Maple Street
Community Health Care ~ Lakewood, Adult Dental-Tacoma
Community Health Center of Snohomish County ~ Everett
Concrete Dental ~ Concrete
Forks Community Hospital ~ Forks
Jamestown S'Klallam Tribe ~ Sequim
McNeil Island Corrections Center ~ Steilacoom
Roger Saux Health Center ~ Taholah
Shoalwater Bay Tribal Clinic ~ Tokeland
SmileQuest ~ Warden
The Dental Village ~ Shelton

DENTISTS

Children's Village ~ Yakima
Clallam Bay Corrections Center ~ Clallam Bay
Columbia Ridge Dentistry ~ Vancouver
Columbia Valley Community Health ~ Chelan
Community Dental ~ Sunnyside
Community Health Care ~ Children's Dental-Tacoma
Concrete Dental ~ Concrete
Family Health Centers ~ Okanogan
Forks Community Hospital ~ Forks
Jamestown S'Klallam Tribe ~ Sequim
Lowell S. Booth DDS, PC ~ Vancouver
Peninsula Community Health Services ~ Aberdeen, Copalis Beach, Pt. Orchard
Roger Saux Health Center ~ Taholah
Sea Mar Community Health Center ~ Burlington
SmileQuest ~ Warden
Stafford Creek Corrections Center ~ Aberdeen
Squaxin Island Health Clinic ~ Shelton
The Dental Village ~ Shelton
Washington State Penitentiary ~ Walla Walla
Yakima Valley Farm Workers' Clinic ~ Spokane Falls
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**RETENTION ONLY****PRIMARY CARE PHYSICIANS (MD or DO)**

Association of Samaritan Physicians ~ Moses Lake  
Cascade Medical Center Family Practice Clinic ~ Leavenworth  
Child and Adolescent Clinic ~ Longview  
Family Practice Clinic ~ Goldendale  
Native Health of Spokane ~ Spokane  
Parkview Pediatrics and Family Medicine ~ Moses Lake  
Peninsula Children's Clinic, Inc. ~ Port Angeles  
Pine Lodge Pre-Release ~ Medical Lake  
Puget Sound Neighborhood Health Centers ~ Greenwood  
Puyallup Tribal Health Authority ~ Tacoma  
SeaMar Community Health Center ~ Olympia  
Skagit Valley Medical Center, Inc. PS ~ Mt. Vernon, Sedro Woolley  
Washington Corrections Center for Women ~ Purdy

**PHYSICIAN ASSISTANTS/NURSE PRACTITIONERS**

Ahtanum View Correctional Complex ~ Yakima (PA)  
Evergreen Treatment Services ~ Seattle (PA)  
Pine Lodge Pre-Release ~ Medical Lake (PA)  
SeaMar Community Health Centers ~ Olympia (NP)  
Swofford and Halma Clinic ~ Sunnyside (NP)  
Virginia Mason Medical Center ~ Port Angeles (PA)  
Washington Corrections Center ~ Shelton (NP)  
Yakima Valley Farm Workers' Clinic ~ Toppenish (NP)

**NURSES**

Ahtanum View Correctional Complex ~ Yakima (RN)  
Family Health Centers ~ Brewster (RN)  
Ferry County Memorial Hospital ~ Republic (RN)  
Mid-Valley Hospital ~ Okanogan (RN)  
North Valley Nursing Home ~ Tonasket (RN)  
Okanogan-Douglas District Hospital ~ Brewster (RN)  
Olympic Physicians ~ Shelton (RN)  
Puyallup Tribal Health Authority ~ Tacoma (RN)  
Spokane Veterans' Home ~ Spokane (LPN)

**PHARMACISTS**

Western State Hospital - Steilacoom

**DENTISTS**

Cashmere Dental ~ Cashmere  
Golden Age Dentistry ~ Kirkland  
Peninsula Community Health Services ~ Aberdeen  
Pine Lodge Pre-Release ~ Medical Lake  
Puget Sound Neighborhood Health Centers ~ Southeast, Central  
Puyallup Tribal Health Authority ~ Tacoma  
Squaxin Island Health Clinic ~ Shelton  
Washington Corrections Center for Women ~ Purdy  
Weiland & Weiland DDS ~ Spokane  
Yakima Valley Farm Workers' Clinic ~ Toppenish

**CERTIFIED NURSE MIDWIVES**

Skagit Valley Medical Center, Inc. PS ~ Mt. Vernon

**Health Professional Loan Repayment  
Eligible Sites - 2004**

Please Note - This list changes in November every year.

## Directory of Facilities - 2004

| SITE                                              | COUNTY/CITY              | CONTACT              | TELEPHONE          |
|---------------------------------------------------|--------------------------|----------------------|--------------------|
| Ahtanum View Correctional Complex                 | Yakima/Yakima            | Joop DeJonge         | 509-573-6353       |
| Airway Heights Corrections Center                 | Spokane/Airway Heights   | Maggie Miller Stout  | 509-244-6828       |
| Association of Samaritan Physicians               | Grant/Moses Lake         | Keith Baldwin        | 509-766-1310       |
| Cascade Medical Center Family Practice Clinic     | Chelan/Leavenworth       | Douglas V. Williams  | 509-548-5815       |
| Cashmere Dental                                   | Chelan/Cashmere          | Jared T. French      | 509-782-2297       |
| Child and Adolescent Clinic                       | Cowlitz/Longview         | Kimberley J. Robbins | 360-423-6140       |
| Children's Village                                | Yakima/Yakima            | Mark Rearrick        | 509-865-6175       |
| Clallam Bay Corrections Center                    | Clallam/Clallam Bay      | Sandra Carter        | 360-963-3236       |
| Columbia Ridge Dentistry                          | Clark/Vancouver          | Wallace Teuscher     | 360-696-3326       |
| Columbia Valley Community Health                  | Chelan/Multiple          | Cheryl Damstetter    | 509-662-6000       |
| Community Dental                                  | Yakima/Sunnyside         | Gary E. Martin       | 509-837-4022       |
| Community Health Association of Spokane           | Spokane/Multiple         | Chris Purviance      | 509-444-8888       |
| Community Health Care                             | Pierce/Multiple          | David Flentge        | 253-597-4550       |
| Community Health Centers of Snohomish County      | Snohomish/Everett        | Kenneth M. Green     | 425-249-2019       |
| Concrete Dental                                   | Skagit/Concrete          | Sharon P. Feller     | 360-770-3502       |
| Eastern State Hospital                            | Spokane/Medical Lake     | Harold E. Wilson     | 509-299-4352       |
| Evergreen Treatment Services                      | King/Seattle             | Ron Jackson          | 206-223-3644       |
| Family Health Centers                             | Okanogan/Multiple        | Peter J. Theobald    | 509-422-7629       |
| Family Practice Clinic                            | Klickitat/Goldendale     | Jeff Teal            | 509-773-4017       |
| Ferry County Memorial Hospital                    | Ferry/Republic           | Ron O' Halloran      | 509-775-3333       |
| Fircrest School for Developmental Disabilities    | King/Shoreline           | Asha Singh           | 206-361-3303       |
| Forks Community Hospital                          | Clallam/Forks            | John Sherrett        | 360-374-6271       |
| Garfield County Memorial Hospital                 | Garfield/Pomeroy         | Andrew Craigie       | 509-843-1591       |
| Golden Age Dentistry                              | King/Kirkland            | Michelle Caldier     | 206-898-3833       |
| Jamestown Family Health/Jamestown S'Klallam Tribe | Clallam/Sequim           | Cindy Lowe           | 360-582-2891       |
| Jefferson General Medical Group                   | Jefferson/Port Townsend  | Beki Lischalk        | 360-385-2200 x2089 |
| Lincoln Hospital Nursing Home                     | Lincoln/Davenport        | Thomas J. Martin     | 509-725-2979 x 134 |
| Lincoln-Rap Work Release                          | Pierce/Tacoma            | Dennis Wheeler       | 253-471-4537       |
| Lourdes Medical Center                            | Franklin/Pasco           | James F. Dover       | 509-546-2350       |
| Lowell S. Booth DDS, PC                           | Clark/Vancouver          | Lowell S. Booth      | 360-694-4000       |
| Martha and Mary Health Services                   | Kitsap/Poulsbo           | Chad Solvie          | 360-394-4010       |
| McNeil Island Corrections Center                  | Pierce/Steilacoom        | Douglas O. Cole      | 253-512-6640       |
| Mid-Valley Hospital                               | Okanogan/Okanogan        | Michael D. Billing   | 509-826-1760       |
| Monroe Correctional Complex                       | Snohomish/Monroe         | Gary P. Fleming      | 360-794-2885       |
| Moses Lake Community Health Center                | Grant/Quincy             | Julie Weisenburg     | 509-765-0674 x2271 |
| Mountain View Women's Health Center               | Mason/Shelton            | Jonathan Gold        | 360-426-0955       |
| Native Health of Spokane                          | Spokane/Spokane          | Toni Lodge           | 509-325-5502       |
| NE Washington Health Programs                     | Stevens/Northport        | Tom Hochwalt         | 509-935-6001       |
| North Basin Medical Clinics                       | Lincoln/Davenport-Wilbur | Paula Erret          | 509-725-7501 x39   |
| North Valley Nursing Home                         | Okanogan/Tonasket        | Warner Bartleson     | 509-486-2151       |
| Odessa Memorial Healthcare Center                 | Lincoln/Odessa           | Mark Barglof         | 509-982-2611 x193  |
| Okanogan-Douglas District Hospital                | Okanogan/Brewster        | Jerry Lane           | 509-689-2517       |
| Olympic Physicians, PLLC                          | Mason/Shelton            | Pamela Schlauderaff  | 360-426-2500       |
| Olympic Primary Care                              | Jefferson/Port Townsend  | Beki Lischalk        | 360-385-2200 x2089 |
| Pacific Care Center                               | Grays Harbor/Hoquiam     | Matthew Wing         | 360-532-7882       |
| Parkview Pediatrics and Family Medicine           | Grant/Moses Lake         | Bev Lane             | 509-766-9450       |
| Peninsula Children's Clinic, Inc.                 | Clallam/Port Angeles     | Pam Boroughs         | 360-457-8578       |
| Peninsula Community Health Services               | Multiple/Multiple        | Barbara P. Malich    | 360-478-2366       |
| Pike Market Medical Clinic                        | King/Seattle             | Debra Morrison       | 206-728-1687 x3026 |
| Pine Lodge Pre-Release                            | Spokane/Medical Lake     | Kaye Adkins          | 509-299-2302       |
| Pomeroy Medical Clinic                            | Garfield/Pomeroy         | Andrew Craigie       | 509-843-1591       |
| Puget Sound Neighborhood Health Centers           | King/Multiple            | Mark Secord          | 206-461-6935 x136  |
| Puyallup Tribal Health Authority                  | Pierce/Tacoma            | Byron C. Larson      | 253-593-0232       |
| Quincy Valley Medical Center                      | Grant/Quincy             | John Perushek        | 509-787-3531       |
| Roger Saux Health Center                          | Grays Harbor/Taholah     | Fawn Tadios          | 360-276-4405       |
| SeaMar Community Health Centers                   | Multiple/Multiple        | Mary Bartolo         | 206-763-5277       |
| Shoalwater Bay Tribal Clinic                      | Pacific/Tokeland         | Marsha Crane         | 360-267-6766       |
| Skagit Valley Medical Center, Inc. PS             | Skagit/Multiple          | Don Schlichtmann     | 360-428-6482       |
| SmileQuest                                        | Grant/Warden             | Dorothy Yamamoto     | 509-349-7420       |
| Spokane Veterans' Home                            | Spokane/Spokane          | Kathleen Magonigle   | 509-344-5777       |
| Squaxin Island Health Clinic                      | Mason/Shelton            | Whitney Jones        | 360-432-3935       |
| Stafford Creek Corrections Center                 | Grays Harbor/Aberdeen    | Doug Waddington      | 360-537-2066       |
| Swofford and Halma Clinic, Inc.                   | Yakima/Sunnyside         | Harlan Halma         | 509-837-3933       |
| Tacoma Pre-Release                                | Pierce/Steilacoom        | James Walker         | 253-761-7661       |
| The Dental Village                                | Mason/Shelton            | Shirley Daniels      | 360-432-1978       |
| Virginia Mason Medical Center                     | Clallam/Port Angeles     | Gary Kriedberg       | 360-457-2185       |
| Washington Corrections Center                     | Mason/Shelton            | Patrick Shannon      | 360-427-4686       |
| Washington Corrections Center for Women           | Pierce/Gig Harbor        | Belinda Stewart      | 253-858-4217       |
| Washington Odd Fellows Home                       | Walla Walla/Walla Walla  | John R. Brigham      | 509-525-6463       |
| Washington State Penitentiary                     | Walla Walla/Walla Walla  | Patricia Rima        | 509-526-6525       |
| Weiland & Weiland, DDS, PS                        | Spokane/Spokane          | Suzanne Weiland      | 509-448-1832       |
| Western State Hospital                            | Pierce/Tacoma            | R. Darrell Hamilton  | 253-756-2846       |
| Yakima Neighborhood Health Services               | Yakima/Yakima            | Rhonda Hauff         | 509-574-5552       |
| Yakima Valley Farm Workers' Clinics               | Multiple/Multiple        | Mark Rearrick        | 509-865-6175       |



## ***2004 Facility Administrator Confirmation***

*This form is to be completed by facility administrator/medical director or appropriate designee and **must** accompany completed application packet.*

Name of Applicant: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
Last Name First Name Middle Initial

Discuss the importance and role of this applicant in your facility/site.

Describe the impact of the loan repayment benefit on your ability to recruit or retain this applicant.

Has your community/site/facility received funds from, or participated in, other state or federal programs, i.e., CBRR, RHSD, CHSD, NHSC, HSR, rural health outreach grant, etc.?

\_\_\_\_\_ Yes \_\_\_\_\_ No If yes, please describe.

***I certify this Loan Repayment program applicant meets all the qualifications for which the site received access barrier points in the site application process. The applicant has made a commitment to stay at this facility for a minimum of three years while participating in the Loan Repayment Program.***

Name: \_\_\_\_\_ Title: \_\_\_\_\_  
(Print or type)

Site: \_\_\_\_\_ Address: \_\_\_\_\_